

EXECUTIVE OFFICE OF HEALTH AND  
HUMAN SERVICES

*ELIZABETH H. ROBERTS, SECRETARY*

Hazard Building  
74 West Road, Cranston RI 02920

PUBLIC RECORDS REQUEST FORM  
UNDER THE ACCESS TO PUBLIC RECORDS ACT

Date \_\_\_\_\_

Name (optional) \_\_\_\_\_

Address (optional) \_\_\_\_\_

\_\_\_\_\_

Telephone (optional) \_\_\_\_\_

E-Mail Address (optional) \_\_\_\_\_

Requested Records: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OFFICE USE ONLY**

Request taken by: \_\_\_\_\_ Request Assigned to: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Records to be available on: \_\_\_\_\_ Mail \_\_\_\_\_ Pick Up \_\_\_\_\_

Records provided: \_\_\_\_\_

Costs: \_\_\_\_\_ copies \_\_\_\_\_ search and retrieval

**Forward this document to the Executive Office of Health and Human Services - ATTN: Jennie DellaPosta**

If, after review of your request, the Department determines that the requested records are exempt from disclosure for a reason set forth in the Access to Public Records Act, the Department reserves its right to claim such exemption.

Note: If you choose to pick up the records, but did not include identifying information on this form (name, etc.), please contact Jennie DellaPosta at (401)462-6823 with the date you made the request and the records requested.

Thank you.